



THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application:

Appl. No.	: 09/751,489	Confirmation No.: 3235
Applicant	: Daniel James Colilla	
Filed	: December 28, 2000	
Art Unit	: 2854	
Examiner	: Daniel James Colilla	
Attorney Docket No.	: F-153	
Customer No.	: 00919	Date: December 15, 2004

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated September 30, 2004, please amend the above-identified patent application as follows:

- **Amendments to the Specification** begin on page 3 this paper.
- **Amendments to the Claims** are reflected in the listing of claims which begins on page 4 of this paper.
- **Amendments to the Drawings** begin on page 10 of this paper and include both an attached replacement sheet and an annotated sheet showing changes.
- **Remarks/Arguments** begin on page 11 of this paper.

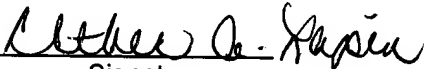
Appln. No.: 09/751,489
Amdt. Dated December 15, 2004
Reply to Office Action dated September 30, 2004

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on December 15, 2004
Date of Deposit


Signature

Esther A. Lapin
Name of Rep.

December 15, 2004
Date



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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of:) Date: December 15, 2004
James A. Salomon, et al.) Attorney Docket No.: F-153
Serial No.: 09/751,489) Customer No.: 00919
Filed: December 28, 2000) Group Art Unit: 2854
Confirmation No.: 3235) Examiner: Daniel James Colilla
Title: **METHOD AND SYSTEM FOR TRANSPORTING MAILPIECES IN A
PRINTING STATION**

AMENDMENT TRANSMITTAL LETTER

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application. The fee has been calculated as shown below.

	Claims Remaining After Amendment	-	Highest Number Previously Paid For	=	Number of Extra Claims Present	X	Rate	=	Additional Fee
Total Claims	20	-	20	=	0	X	\$50.00	=	0.00
Independent Claims	2	-	3	=	0	X	\$200.00	=	0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT									\$ 0.00

No additional fee is required.

Please charge any additional fees or credit overpayment to Deposit Account Number
16-1885.



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